PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10/735/249

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	CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL	ENTITY			R THAN
	TOTAL CLAIN	IS .	Colu	T /L-		(Colonini 2)		TYPE.			SMALI	
l ,	OR		AUMO	NUMBER FILED		NUMBER EXTRA		BASIC FE	FEE 385.0		RATE	FEE
-	· · · · · · · · · · · · · · · · · · ·	EABLE CLAIMS	 	- 					303.0	OF	BASIC FE	
	•		1-90	45 minus 20=		* 25 *		X\$ 9=	ļ	OR	X\$18=	4500
-	DEPENDENT			minus 3 =				X43=		OR	X86=	
L	MULTIPLE DEPENDENT CLAIM PRESENT						ŀ	+145=		OR	+290=	
* (* If the difference in column 1 is less than zero, enter "0" in column 2						. !	TOTAL	 	OR	L	B1.220
:	CLAIMS AS AMENDED - PART II						•		L	~ . ''		THAN
_	· · · · · · · · · · · · · · · · · · ·	(Column 1)	· ·	(Column 2) (Column 3)			1 -	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	. ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		~		X43=		OR	X86≕	
_	FIRST PRES	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			· + 4C	ļ		+290=	
	•			•		••	L	+145=		OR	TOTAL	ļ
							Α	DOIT. FEE		JOR .	ADDIT. FEE	<u> </u>
_	· · · · · · · · · · · · · · · · · · ·	(Column 1)	7	(Colum HIGHE		(Column 3)						
AMENUMENT B		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	ER JSLY.	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	· .	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus ⁻	***		=		X43=		OR	X86=	
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			100		
								+145=		OR	+290=	
	.*						AE	TOTAL DOIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	·	(Column		(Column 3)						-
-		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA	u.	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	ndependent	*	Minus .	***		=	-	X43=		-	X86=	
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR _	7.002	
11 11	ho antou '						-+	145=		QR	+290=	
· If t	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR AC	TOTAL DDIT. FEE	
Th	ne Hignest Numb e "Highest Numb	nber Previously Pai Per Previously Paid	d For IN THIS For" (Total or	S SPACE is le Independent)	ss than is the h	3, enter "3."' lighest number f		olT. FEE L in the appro	priate box			